# California Department of Corrections and Rehabilitation

# Office of Audits and Compliance



# Disability Placement Program Compliance Review

**Solano State Prison** 

**February 22 – February 25, 2010** 

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# February 22 - 25, 2010

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#### COMPARATIVE STATISTICAL SUMMARY CHART

OVERALL RATING	PHYSICAL PLANT MAINTENANCE RATING	RATING WITHOUT PHYSICAL PLANT MAINTENANCE	LAST AUDIT RATING (9-22-08)
70%	52%	76%	83%

Below are the Disability Placement Program (DPP) ratings for each area. Areas that have a score below 85 percent require a Corrective Action Plan (CAP). The Warden and Medical Administrator shall be responsible for preparing and implementing a CAP. It is recommended that appropriate institutional staff coordinate with the Office of Court Compliance (OCC) Field Correctional Counselor II in developing the CAP. The CAP is due to the Office of Audits and Compliance (OAC) within 30 days of the date on the transmittal memo for the preliminary audit report. Also, a copy of your institution's CAP should be forwarded to your Associate Director (AD) and the Correctional Administrator of OCC, Julian Martinez.

#### A. DPP POLICY (82%)

- 3. The Institution does not have a written plan for alternate DPW Administrative Segregation Unit (ASU):
  - b. Yard accessibility
  - c. Showers

#### **B. DPP MISSION (100%)**

#### C. DPP TRAINING (77%)

- 1. Formal training with the DPP Lesson Plans is required to include the following:
  - b. **Custody**: A-0556 (Custody and Correctional Counselor Staff)

Number of staff required training: 768, staff trained: 569 ~ (74%)

c. Classification: A-0555 (Correctional Counselor Staff)

Number of staff required training: 46, staff trained: 25 ~ (54%)

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d. Health Care: A-0557 (Medical, Mental Health, Dental Staff)

Number of staff required training: <u>278</u>, staff trained: <u>170</u> ~ (61%)

- 2. Designated staff are required to receive formal training in each of the following:
  - a. Health Care Appliances: A-1170 (Custody Staff in ASU/Receiving & Release/Transportation:

Number of staff required training: 86, staff trained: 55 ~ (64%)

b. **Effective Communication** (EC): A-1171 (Correctional Counselors/Health Care Staff)

Number of staff required training: 161, staff trained: 113 ~ (70%)

#### D. DPP PROCESS VERIFICATION (63%)

A total of 80 Central Files (C-Files) were reviewed.

8. The Classification Chrono, CDC Form 128-G, (initial/annual) is required to document DPx or DNx status and placement.

74 relevant C-Files reviewed, 32 correct ~ (43%)

 The Classification Committee is required to consider the inmate's limitations as documented in the Chrono Medical Psych., Dental, CDC Form 128-C or Comprehensive Accommodation Chrono, CDC Form 7410, during program assignments.

18 relevant C-Files reviewed, 8 correct ~ (44%)

10. Based on the application of criteria in Armstrong Remedial Plan (ARP) II.H and IV K, DPP inmates are required to be evaluated for community-based programs (Camp, Foreign Prisoner Transfer Treaty Program, Drug Treatment Furlough, and Community Prisoner Mother Program).

16 relevant C-Files reviewed, 13 correct ~ (81%)

- 12. Inmates designated as DPH, DPS, DNH and DNS are required to be interviewed within 14 days of arrival or of being identified as DPH, DPS, DNH or DNS to determine the inmates' primary and secondary method of communication.
  - 13 relevant C-Files reviewed, 8 correct ~ (62%)

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13. The Release Study Program/Parole Assessment, CDC Form 611 (Rev 05/01), or General Chrono, ADA Documents for Transition to Parole, CDC Form 128-B, shall appropriately reflect all documents in the C-File that verify disabilities.

7 relevant C-Files reviewed, 4 correct ~ (57%)

14. The Notice of Conditions of Parole, CDC Form 1515 (Rev 05/01), shall document effective communication and accommodations provided to vision, hearing and speech disabled inmates on the Learning Disability (LD) and Test of Adult Basic Education (TABE) 4.0 or Lower Lists.

3 relevant C-Files reviewed, 0 correct ~ (0%)

#### E. PHYSICAL PLANT AND MAINTENANCE (52%)

- 1. Institutional Managers and staff are required to have current version of the Operational Procedure FMD-0100.
  - d. Work Order Coordinators (WOC)

<u>11</u> WOC's reviewed, <u>5</u> correct ~ (45%)

2. Work Request (W/R) forms shall be available to Facility/Housing Staff.

5 relevant Facility/Housing Units reviewed, 0 correct ~ (0%)

- Employees are required to complete Americans with Disabilities Act (ADA), W/R forms, note "ADA" on the upper portion of the request, sign and route the forms to their supervisor during their shift.
  - a. Note as ADA

**9** relevant W/R's reviewed, **0** correct ~ **(0%)** 

b. Signed and routed

8 relevant W/R's reviewed, 3 correct ~ (38%)

4. Employees and supervisors are required to properly categorized W/R as ADA W/R.

10 relevant W/R's reviewed, 5 correct ~ (50%)

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- 5. The WOC's are required to assign the W/R an ADA program log number and maintain a copy of W/R's submitted by their department.
  - a. Assign each ADA W/R with an ADA program log number
    - 4 relevant Work Orders reviewed, 3 assigned correctly ~ (75%)
  - b. Maintain a copy of all W/R's submitted by their departments
    - 4 relevant W/R's reviewed, 1 correct ~ (25%)
  - c. Send copy of the ADA W/R to ADA Coordinator
    - 11 relevant W/R's reviewed, 0 copies sent ~ (0%)
  - d. Maintain a program log book or acceptable tracking alternative
    - 11 relevant log books reviewed, 3 correct ~ (27%)
- 6. The department supervisors are required to review the W/R forms for accuracy, sign, and route the originals to the WOC's in a timely manner.
  - b. Routed timely to WOC
    - $\underline{1}$  reviewed, with  $\underline{0}$  routed timely  $\sim (0\%)$
- 7. The ADA W/R's for repairs are required to be input in the Standard Automated Preventive Maintenance System (SAPMS) system correctly.
  - c. W/R's must be input within 24 hours of receipt
    - 8 reviewed with 5 input timely ~ (63%)
  - d. ADA must be noted on the upper portion of the Work Order
    - 9 relevant Work Orders reviewed, 3 correct ~ (33%)
  - e. The Program log number must be reflected on the Work Orders
    - **6** reviewed with **3** containing Program log numbers ~ **(50%)**

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f. Work Orders must contain asset number

8 relevant Work Orders reviewed, 3 correct ~ (38%)

- 9. The ADA Coordinator is not tracking, following-up, and monitoring the status of ADA repairs as required.
- 11. The institution's Asset/Feature Report must be updated to reflect the actual asset/feature.

10 asset features and locations reviewed, 6 correct ~ (60%)

# F. APPEALS (96%)

5. The Reasonable Modification or Accommodation Request, CDCR Form 1824, response due date must be assigned based upon the date the Appeals Office receives the appeal.

**60** relevant 1824's reviewed, **50** correct ~ **(83%)** 

#### **G. HOUSING** (91%)

1. The Disability Effective Communication (DEC) System DPP housing rosters are required to be distributed to the Housing Units, Medical, Dental and Mental Health Clinics and the Principal at least weekly.

Clinics: 6\_relevant areas, 1\_correct ~ (17%)

Education/Vocation Supervisor: 1 relevant, 0 correct ~ (0%)

#### H. EC (38%)

- 2. The Education Department is not meeting the requirement of maintaining a tracking system of TABE scores or distributing the TABE 4.0 or Lower List to the Division Heads weekly.
- 3. The Division Head is required to distribute the TABE 4.0 or Lower List to the appropriate staff.

Interviewed 4 relevant areas, 3 correct ~ (75%)

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- 4. The Education Department is not maintaining a Learning Disability (LD) list or distributing it to all Division Heads on a weekly basis.
- 5. The Division Head is required to distribute the LD list to the appropriate staff.

Interviewed 4 relevant areas, 3 correct ~ (75%)

- 7. EC is required to be documented for inmates with vision, hearing and speech disabilities and inmates on LD and TABE 4.0 or Lower Lists on the following due process documents: Notice of Classification Hearing, CDC Form 128-B-1; Classification Chrono, CDC Form 128-G; Rules Violation Report, CDC Form 115; (initial copy issuance, Hearing disposition and final copy issuance), Investigative Employee Reports and Administrative Segregation Placement, CDC Form 114-D. Reference (ARP II.E.2 and October 22, 2003, Effective Communication Memorandum Revised).
  - a. Classification Chrono (CDC 128-G)
    - a1. If the inmate waived assistance or accommodation was required, it was not documented.
      - 22 relevant 128 G's reviewed, 11 correct ~ (50%)
    - a2. If assistance or accommodation was required, it was not provided.
      - 22 relevant 128 G's reviewed, 8 correct ~ (36%)
    - a3. If assistance or accommodation was provided, staff did not document how they determined the inmate understood the communication.
      - 22 relevant CDC 128 G's reviewed, 7 correct ~ (32%)
  - b. Notice of Classification Hearings (CDC 128 B-1)
    - b1. If the inmate waived or no assistance or accommodation was required, it was not documented.
      - 31 relevant CDC 128 B-1's reviewed, 11 correct ~ (35%)
    - b2. If assistance/accommodation was required, it was not provided.
      - 32 relevant CDC 128B-1's reviewed, 10 correct ~ (31%)

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- b3. If assistance or accommodation was provided, staff did not document how they determined the inmate understood the communication.
  - 32 relevant CDC 128B-1's reviewed, 9 correct ~ (28%)
- d. Rules Violation Report (115)
  - d1. If the inmate waived or no assistance or accommodation was required, it was not documented.
    - 9 relevant CDC 115's reviewed, 1 correct ~ (11%)
  - d2. If assistance or accommodation was required, it was not provided.
    - 9 relevant CDC 115's reviewed, 1 correct ~ (11%)
  - d3. If assistance or accommodation was provided, staff did not document how they determined that the inmate understood the communication.
    - 9 relevant CDC 115's reviewed, 0 correct ~ (0%)

A total of 40 Unit Health Records (UHR) were reviewed.

- 8. Health Care Providers are required to document EC for Clinical encounters with DPH, DPV, DPS and inmates on the LD and TABE 4.0 or Lower Lists.
  - a. Medical (Generated at Institution)
    - a1. If the inmate waived or no assistance or accommodation was required, it was not documented.
      - 30 documented encounters, 1 correct ~ (3%)
    - a2. If assistance or accommodation was required, it was not provided.
      - 32 documented encounters, 2 correct ~ (6%)
    - a3. If assistance or accommodation was provided, staff did not document how they determined the inmate understood the communication.
      - 27 documented encounters, 2 correct ~ (7%)

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- b. Dental (Generated at Institution)
  - b1. If the inmate waived or no assistance or accommodation was required, it was not documented.
    - 12 documented encounters, 4 correct ~ (33%)
  - b2. If assistance or accommodation was required, it was not provided.
    - 15 documented encounters, 5 correct ~ (33%)
  - b3. If assistance or accommodation was provided, staff did not document how they determined that the inmate understood the communication.
    - 15 documented encounters, 5 correct ~ (33%)
- c. Mental Health (Generated at Institution)
  - c1. If the inmate waived or no assistance or accommodation was required, it was not documented.
    - 9 documented encounters, 0 correct ~ (0%)
  - c2. If assistance or accommodation was required, it was not provided.
    - 10 documented encounters, 0 correct ~ (0%)
  - c3. If assistance or accommodation was provided, staff did not document how they determined that the inmate understood the communication.
    - 10 documented encounters, 0 correct ~ (0%)

### I. DISABILITY VERIFICATION (84%)

3. When a Disability Placement Program Verification, CDC Form 1845, is present, a corresponding CDC 128-C or CDC 7410 listing physical limitations or assistance with daily living needs is required.

UHR: 28 relevant files reviewed, 19 correct ~ (68%)

C-File: 43 relevant files reviewed, 28 correct ~ (65%)

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5. The 128-B EC Chronos are not attached to the CDC 1845, for inmates with hearing and speech disabilities in the C-File and UHR.

UHR: 17 relevant files reviewed, 1 correct ~ (6%)

C-File: 30 relevant files reviewed, 24 correct ~ (80%)

12. Special order health care appliances are required to be delivered to the inmate within 10 days of arrival to the institution.

2 reviewed, 0 correct ~ (0%)

J. DEC SYSTEM (100%)

# K. ACCESSIBILITY OF PROGRAMS (89%)

2. Specific information is required to be included in Orientation for all inmates

The following process does not include all required DPP information: (Orientation Booklet) Verified case-by-case medical exceptions to institutional count procedures.

- j. Information regarding emergency alarms, evacuations, written announcements and notices.
- 7. Post Orders are required to include DPP information:
  - a. Announcing count, movement, etc. for DPH and DPV inmates.

25 Post Orders reviewed, 11 correct ~ (44%)

b. Emergency or Evacuation Procedures:

25 Post orders reviewed, 10 correct ~ (40%)

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#### **CAP Preparation Instructions:**

The CAP should address each finding in the preliminary report that received a rating below 85 percent. Corrective measures should be realistic; they should completely resolve/correct the finding/violation. If resolution/correction of the problem is above and beyond the institution's capabilities, the CAP should explain why and specify how the institution plans to address it. Each corrective measure should include either a completion date or a projected completion date. Please do not list completion dates as "on-going." Corrective measures may include actions such as revising procedures, developing new procedures, training impacted staff, implementing a monitoring system, etc. Once these measures are in place, the corrective measure has been implemented and that date should be entered in the CAP.

Review and Approval Process: The Correctional Administrator of OCC approves the CAP or returns it for modifications prior to approval.

Final Reports: Once the DPP CAP is approved by OCC, OCC sends an approval memorandum to the institution.

CAP Status Reports: On a quarterly basis (by the 15th of the month in January, April, July, and October), each institution shall submit to their respective AD, Regional Health Care Administrator, and the OCC Correctional Administrator a status report of the DPP CAP.

# **DISABILITY CODES AND DEFINITIONS**

Inmate Requires Special Placement at Designated DPP Facility	Inmate Does Not Requires Special Placement and May be Placed at any Facility According to Case Factors
<b>DPW-</b> Full time Wheelchair User Requires wheelchair accessible housing and path of travel.	No corresponding category.
DPO-Intermittent Wheelchair User Requires lower bunk, wheelchair accessible path of travel and does not require wheelchair accessible cell.	No corresponding category.
DPM- Mobility Impairment-With or without assistive devices (wheelchairs shall not be prescribed).  Orthopedic, neurological or medical condition that substantially limits ambulation (cannot walk 100 yards on a level surface without pause). Requires lower bunk, no triple bunk, and no stairs in path.  DPH-Deaf/Hearing Impairment	DNM-Mobility Impairment (lower extremities) Walks 100 yards without pause with or without assistive devices.  DNH-Hearing Impairment
Must rely on written communication, lip reading, or signing as residual hearing with assistive devices will not enable them to hear, understand, or localize emergency warning or public address announcements.	With residual hearing at a functional level with hearing aid(s).
<b>DPV-</b> Blind/Vision Impairment Not correctable to central vision of better than 20/200 with corrective lens in at least one eye.	No corresponding category.
DPS-Speech Impairment Does not communicate effectively speaking or in writing.	DNS-Speech Impairment Does not communicate effectively speaking, but does when writing.

# **GLOSSARY**

ADA	American with Disability Act
ADL	Assistant with Daily Living
ARP	Armstrong Remedial Plan
ASU	Administrative Segregation Unit
BPH	Board of Parole Hearings
CAP	Corrective Action Plan
CC	Correctional Counselor
CCR	California Code of Regulations
C-File	Central File
CDC 114-D	Administrative Segregation Unit Placement Notice
CDC 115	Rules Violation Report
CDC 128-B	General Chrono
CDC 128-B1	Notice of Classification Hearing
CDC 128-C	Chrono Medical, Psych., Dental
CDC 128-G	Chrono Classification (Regular)
CDC 611	Release Study Program/Parole Assessment
CDC 1845	Disability Placement Program Verification
CDC 7410	Comprehensive Accommodation Chrono
CDCR 602	Inmate/Parolee Appeal English
CDCR 816	Reception Center Readmission Summary
CDCR 1515	Notice & Conditions of Parole
CDCR 1824	Reasonable Modification or Accommodation Request
СМО	Chief Medical Officer
СРМР	Community Prisoner Mother Programs
C&PR	Classification and Parole Representative
DEC	Disability Effective Communication
DPP	Disability Placement Program
DNx	Disability Not Impacting Placement
DPx	Disability Impacting Placement
DTF	Drug Treatment Furlough
EC	Effective Communication
EFF. COMM.	Effective Communication
FMD	Facilities Management Division
FTTP	Foreign Prisoner Transfer Treaty Program
GP	General Population
HCA	Health Care Appliance
ISRS	Institutional Staff Recommendation Summary
LD	Learning Disability
LOP	Local Operational Procedures
MOHU	Mental Health Outpatient Housing Unit
OCC	Office of Court Compliance
PG	Privilege Group

PHU	Protective Housing Unit
PLO	Prison Law Office
PSU	Psychiatric Services Unit
RBG	Rosen Bien and Galvan, LLP
RC	Reception Center
R&R	Receiving and Release
SA	Staff Assistant
SAPMS	Standard Automated Preventive Maintenance System
SHU	Security Housing Unit
TABE	Test of Adult Basic Education
TTY	Teletype Writer
UHR	Unit Health Record
VHS	Vision/Hearing/Speech
WO	Work Order
WOC	Work Order Coordinator
W/R	Work Request

	Institutional Summary		Value	Score	Success	
		_	2160	1522	70%	
A.	DPP POLICY		110	90	82%	
B.	DPP MISSION		40	40	100%	
C.	DPP TRAINING		170	131	77%	
D.	DPP PROCESS VERIFICATION		110	69	63%	
E.	PHYSICAL PLANT AND MAINTENANCE		460	238		
F.	APPEALS		300	289	96%	
G.	HOUSING		100	91	91%	
H.	EFFECTIVE COMMUNICATION		390	149	38%	
I.	DISABILITY VERIFICATION		180	151	84%	
J.	DEC SYSTEM		60	60	100%	
K.	ACCESSIBILITY OF PROGRAMS		240	214	89%	

# A. DPP POLICY

			Value	Score
1.	Are the ARP, Armstrong court related documents, and departmental memoranda contained in the Hiring Authority Binder?			
	a. Warden	Y	10	10
	b. Health Care Manager/CMO	Y	10	10
2.	Do Local Operational Procedures (LOPs) include the following for inmates with disabilities? (ARP IV.I.2b, 5, 6, 8, & 10)  a. Modification of standing count procedures for mobility impaired inmates  b. Search procedures for mobility impaired inmates and prosthetic limbs  c. Telephone/TTY Procedure  d. Evacuation Procedure	Y Y Y Y	10 10 10 10	10 10 10 10
3.	Does the institution have a written plan for alternate DPW ASU: a. Housing b. Yard accessibility c. Shower	Y N N	10 10 10	10 0 0
4.	Is the current DPP Disability Effective Communication (DEC) Roster in the Hiring Authory Binder? a. Warden b. Health Care Manager/CMO	Y Y	10	10 10
В.	DPP MISSION	Total	110	90
1.	Is the Institution's DPP mission contained in the Hiring Authority Binder?			
	a. Wardern	Y	10	10
	b. Health Care Manager/CMO	Y	10	10
2.	Is an ADA Coordinator identified and is he/she at an Associate Warden/Correctional Administator level or higher?	Y	10	10
3.	Is the DPP Teacher position(s) filled?	0	0	0
4.	Are DPP responsibilities included in duty statements for the following?: a. ADA Coordinator b. DPP Teacher	Y 0	10	10
5.	Is the staff Sign Language Interpreter position filled, or has the institution made efforts to fill the position where required?	0 Total	0 40	0 40

# C. 1DPP Training

	G						Value	Score
1.	Have staff received formathe following?:	al DPP train	ing with a DPP Lesson	n Plans to include				
	a. Overview: A-0554 (A	ll Staff)						
	Number of Staff		Number of Staff					
	Requiring Training	1099	Trained	1057	96%		20	19
	b. Custody: A-0556 (Cus	stody and Co	rrectional Counselor S	taff)		-		
	Number of Staff		Number of Staff					
	Requiring Training	768	Trained	569	74%		20	15
	c. Classification: A-0555	(Correction	al Counselor Staff)			-		
	Number of Staff		Number of Staff					
	Requiring Training	46	Trained	25	54%		20	11
	d. Health Care: A-0557 (	Medical, Mo	ental Health, Dental Sta	aff)		-		
	Number of Staff		Number of Staff					
	Requiring Training	278	Trained	170	61%	Ī	20	12
2.	Have designated staff rece	eived formal	training in each of the	following?:		-		
	a. Health Care Appliance	s: A-1170 (C	Custody Staff in ASU/S	HU/R&R/Transpor	tation)			
	Number of Staff		Number of Staff					
	Requiring Training	86	Trained	55	64%	Ī	20	13
	b. Effective Communicati	ion: A-1171	(Correctional Counsel	ors/Health Care Staf	f)	_		
	Number of Counseling		Number of Staff					
	Requiring Training	47	Trained	40	85%	Ī	20	17
		77	<del></del> -	40	0370	L	20	17
	Number of Health		Number of Staff			_		
	Care Staff Requiring	161	Trained	113	70%		20	14
_	Training							
3.	Does training for Staff As communication for inmate					<del></del> 1r		1
	TABE 4.0 or Lower lists?		ng, vision, speech impa	inments and minates	s on the LD and	Y	10	10
						<del></del> 1r		T
4.	Does training for Investigation for Envestigation for Investigation for Investigatio				_	Y	10	10
	LD and TABE 4.0 or Low		vitii nearing, vision, spe	eech impairments ai	d illinates on the			
5.	Does training for Hearing		l Sanjor Haaring Office	are include evicting	policy for	Y	10	10
٥.	determining and documen		-		_		10	10
	impairments and inmates	_		_				
	•							
						Total	170	131
						Total	1/0	131

# SOLANO DISABILITY PLACEMENT PROGRAM COMPLIANCE REVIEW

D.	DPP PROCESS VER	IFICATIO	N				Value	Score
1.	Does the bus screening p whether the inmate has a		le an interview to	determine				
	Number Reviewed	1	Number OK	1	100%		10	10
2.	If the interview indicates does the nurse refer the i							
	Number Reviewed	1	Number OK	1	100%		10	10
3.	Does the Institution Staff Summary contain inform		•		CDC 816, RC Readmission	1		
	Number Reviewed	0	Number OK	0	0%		0	0
4.	If the RC stay is extende	d and the inm	nate is DPX or dia	lysis, is there	e a CDC 128G addressing the	he		
	Privilege Group (PG) on			0	00/			0
	Number Reviewed	0	Number OK	0			0	0
5.	If extended stay privilege		-	_				1
	Number Reviewed	0	Number OK	0	0%		0	0
6.	Are inmates who have in							
	Reception Center with a	mission that	is inconsistent wit	th the inmate	's disability?	0	0	0
7.	Is the Expedited Transfer	r process beir	ng followed for G	eneral Popula	ation inmates	Y	10	10
	that have disabilities that	impact their	placement?			<u> </u>		
8.	Is there a CDC Form 128	R G documen	ting DPv or DNv	status and nl	acement?			
0.	Number Reviewed	74	Number OK	32	43%		10	4
							10	·
9.	Does the Classification CCDC Form 128C or CDC							
	Number Reviewed	18	Number OK	8	44%		10	4
10.	Are DPP inmates evalua based on the application				FTTP, DTF, CPMP)			
	Number Reviewed	16	Number OK	13	81%		10	8
11.	If the DPx inmate is or CDC Form 128G reflec CDC Form 128 C and/or Number Reviewed	ting a classif	ication committee				0	0

# SOLANO DISABILITY PLACEMENT PROGRAM COMPLIANCE REVIEW

D.	DPP PROCESS VERIFICATION		Value	<b>C</b>
12	Are inmates designated as DPH, DPS, DNH, and DNS interviewed within 14 days of arrival or of being identified as DPH, DPS, DNH or DNS to determine the inmates' primary and secondary methods of communication?		varue	Score
	Number Reviewed 13 Number OK 8 62%  Comments:		20	12
13.	Does the CDC Form 611 (Rev 05/01) or CDC Form 128B, ADA Documents for Transition to Parole, appropriately reflect all documents in the Central File that verify disabilities?			
	Number Reviewed 7 Number OK 4 57%  Comments:		20	11
14	Does the CDC Form 1515 (Rev 05/01) document effective communication and accommodations provided to vision, hearing and speech disabled inmates and inmates on the LD and TABE 4.0 or Lower lists?			
	Number Reviewed 3 Number OK 0 0%  Comments:		10	0
		Total	110	69

#### E. PHYSICAL PLANT AND MAINTENANCE

1.	Do the following institutional ma	anagers and	d staff have the curre	ent revision	of the Operational			Value	Score
	Procedure FMD-0100?								
	b. ADA Coordinator						Y	20	20
	c. Correctional Plant Manager	5	No OV	11	Total WOC	450/	У	20	9
	d. Work Order Coordinators	5	No. OK	11	Total WOC	45%		20	9
2.	Are work request forms available	e to Facilit	y/Housing Unit staff No. OK	: 5	Total Facilities	0%		20	0
			NO. OK		- Total Facilities	070		20	0
3	Do employees complete ADA w the request, as well as signing an								
	a. Note as ADA	0	No. OK	9	Total ADA W/R	0%		20	0
	b. Sign and Route	3	No. OK	8	Total ADA W/R	38%		20	8
4	Have employees and supervisors	properly c	categorized work req	uests as AI	OA work requests?				
		5	No. OK	10	Total W/R	50%		20	10
5	Do the Work Order Coordinators number and maintain a copy of V	Work Requ	ests submitted by the	eir departm					
	a. Assign each ADA Work Requ	est with ar			T. ( .1 ADA W/D	750/		20	1.5
			Assigned Correctly	4	Total ADA W/R	75%		20	15
	b. Maintain a copy of all ADA	Work Requ	ests submitted by the	eir departm	nents?				
	,	1	No. OK	4	Total WOC	25%		20	5
	c. Send copy of Work Requests t	o ADA Co	ordinator?						
	c. Selid copy of Work Requests	0	No. OK	11	Total WOC	0%		20	0
	•			•	_				
	d. Maintain a program log book			ive?					
_		3	No. OK	11	Total WOC	27%		20	5
6	Do the department supervisors and route the originals to the W was received or by the next busin	ork Order	Coordinator within	the same d					
	a. Supervisor review and sign	7	No. OK	8	Total ADA W/R	88%		20	18
	b. Route timely to WOC	0	No. OK	1	Total ADA W/R	0%		20	0
7	Are all the ADA work requests f correctly?	or repairs i	input into the SAPM	S system					
	a. Does the institution have a des	signated SA	APMS Manager to in	put Work l	Requests?		У	20	20
	b. Does institution have at traine	ed backup	for the SAPMS Man	ager?			у	20	20
	c. W/R input within 24 hours								
	of receipt ?	5	No. OK	8	Total ADA W/O	63%		20	13
	d. Is ADA noted on upper portion of the Work Order	3	No. OK	9	Total ADA W/O	33%		20	7
	e. Program log number is reflected on Work Order?	3	No. OK	6	Total ADA W/O	50%		20	10
	f. Work order contains asset				_				
	number? g. DPP asset location identified	3	No. OK	8	Total ADA W/O	38%		20	8
	on Work Order?	9	No. OK	9	Total ADA W/O	100%		20	20

#### E. PHYSICAL PLANT AND MAINTENANCE

		Value	Score
8	Do ADA work orders get generated for inmate appeals (1824/602) with legitimate claims of an inoperable ADA feature or asset?		
	0 No. Generated 0 Total Appeals 0%	0	0
9	Does the ADA Coordinator track, follow-up and monitor the status of ADA repairs?	20	0
10.	Does the ADA Coordinator track whether alternative/interim accommodations have been provided when ADA repairs have not been made within 24 hours?	20	20
11.	Is the Institution Asset/Feature Inventory Report updated to reflect the actual asset/feature?		
	6 No. OK 10 Total Appeals 60%	20	12
	Total	460	238

# F. APPEALS

						Value	Score
1.	If the Appeals Coordinator p the vacancy filled within this		any time since Januar	ry 18, 2007, was	Y	20	20
2.	If the Medical Appeals Anal	lust position(s) was vac	ent at any tima sinca Is	unuary 18, 2007			
	was the vacancy filled within		ant at any time since sa	muary 16, 2007,	Y	20	20
2	A CDC F 1924	alle de l'amondo de de Col					
3.	Are CDC Form 1824s availa		_	1000/		10	
	<ul><li>a. GP housing units</li><li>(including Mental Health)</li></ul>	Number OK		100%		10	10
	b. Medical Housing	1 Number OK	1	100%		10	10
	c. Libraries	2 Number OK	2	100%		10	10
	d. Law Library	2 Number OK	2	100%		10	10
	e. Special Housing	2 Number OK	2	100%		10	10
4.	Are appeal boxes emptied do not have appeal boxes, ar room and forwarded to the A	re CDC Form 1824s rou		tion mail, delivered to			
	<ul><li>a. GP housing units</li><li>(including Mental Health)</li></ul>	22 Number OK		100%		10	10
	b. Medical housing	1 Number OK	1	100%		10	10
	c. Special Housing	2 Number OK	2	100%		10	10
5.	Are CDC 1824 response due appeals office receives the a	_	pon the date the				
	Number Reviewed	60 Number OK	50	83%		20	17
6.	Are CDC 1824s being sent t	to the appropriate division	on head for response?				
	Number Reviewed	71 Number OK	68	96%		20	19
7.	Are CDC 1824s referred to	medical for verification	when required?				
	Number Reviewed	56 Number OK	56	100%		20	20
8.	Are staff following the ARP	process for medical ver	rification?				
	Number Reviewed	30 Number OK	29	97%		20	19
9.	Are temporary (interim) acc	_		400::			1
	Number Reviewed	14 Number OK	14	100%		20	20
10.	Are the CDC 1824 response	1 .					
	Number Reviewed Comments:	67 Number OK	58	87%		20	17

# F. APPEALS

11	And the CDC 1924s notes and	40.41.0.0		:C	adding frames?	Value	Score
11.	Are the CDC 1824s returned	to the a	ippellant within	specific	ed time frames?		т п
	a. 1 <sup>st</sup> Level Custody?	38	Number OK	33	<u>87%</u>	10	9
	b. 2 <sup>nd</sup> Level Custody?	11	Number OK	11	100%	10	10
	c. 1 <sup>st</sup> Level Medical?	105	Number OK	104	99%	10	10
	d. 2 <sup>nd</sup> Level Medical?	20	Number OK	20	100%	10	10
12.	If the appeal was rejected (no upon the criteria in ARP IV.I Number Reviewed	-		•	rejection based91%	20	18
13. If the appeal issue involved a major life activity, safety, effective communication for due process or medical, or otherwise meets the criteria outlined in CCR 3084.7a, was it processed as an emergency appeal?(Waived 1st Level and 2nd Level completed in 5 working days)							
	Number Reviewed	0	Number OK	0		0	0
							T 1
					Total	300	289

# G. HOUSING

1.	Are the DEC DPP housing rosters distr Medical Housing, Medical, Dental and Principal at least weekly?					Value	Score
	GP Housing Units	22	Number OK	21	95%	5	5
	Medical Housing	1	Number OK	1	100%	5	5
	Clinics	6	Number OK	1	17%	5	1
	Education/Vocation Supervisor	1	Number OK	0	0%	5	0
	Special Housing	2	Number OK	2	100%	5	5
2.	Are all DPP inmates housed according a. DPW cells/bed? GP Housing Units (including Mental				00/		
	Health)	0	Number OK	0		0	0
	Special Housing	0	Number OK	0	0%	0	0
	b.DPP with Lower Bunk Chrono?						
	GP Units reviewed	22	Number OK	22	100%	10	10
	Special Housing	2	Number OK	2	100%	10	10
	c. DPP with Lower Tier Chrono?						
	GP Units reviewed	22	Number OK	22	100%	10	10
	Special Housing	2	Number OK	2	100%	10	10
	d. Ground floor?						
	GP Housing Units (including Mental	6	Number OK	6	100%	10	10
	Special Housing	0	Number OK	0	0%	0	0
3.	Are the ADA posters (with the PLO &	RBG addr	esses) displayed i	n locations			
	that are in plain sight to the inmates.						
	GP Housing Units (including Mental _ Health)	22	Number OK	21	95%	5	5
	Special Housing	2	Number OK	2	100%	5	5
	Medical Housing	1	Number OK	1	100%	5	5
	Law Libraries Reviewed	2	Number OK	2	100%	5	5
	Libraries Reviewed	2	Number OK	2	100%	5	5
	_						
						Total 100	91

	H. EFFECTIVE COMMUN	NICATION				Value	Score
1.	The following questions refer to	the inmate libraries:				value	Score
	a. Does the law library contain						
	e.g., large print ARP, audio, Br	aille?					
	Reviewed 2	Number OK	2	100%		5	5
	b. Does the recreational library	contain materials in	alternate				
	formats? e.g., large print ARP,	audio, Braille?					
	Reviewed 2	Number OK	2	100%		5	5
	c. Is there a written procedure f	or access to library ed	quipment?				
	Reviewed 0	Number OK	0	0%		0	0
	d. Are CDC Form 1824s availa	able in the library?					
	Reviewed 4	Number OK	4	100%		5	5
	e. Are electronic reader machin	es in good working co	ondition, e.g.	Galileo?			
	Reviewed 0	Number OK	0	0%		0	0
	f. Does the library have a magn	ifier in good working	condition?				
	Reviewed 4	Number OK	4	100%		5	5
_						20	
2.	Does the Education Departmen				N	20	0
	distribute the TABE 4.0 or Low			KIY?			
3.	Does the Division Head distributhe appropriate staff?	ute the TABE 4.0 or I	Lower List to				
	Interviewed 4	Number OK	3	75%		20	15
4	D 4 E1 2 D 4					-	
4.	Does the Education Departmen distribute it to all Division Head				N	20	0
	distribute it to air Division frea	us on a weekly busis.			14	20	U
5.	Does the Division Head distribu	ute the LD list to the a	appropriate st	aff?			
	Interviewed 4	Number OK	3	75%		20	15
6.	Does the Education Departmen	t issue a CDC 128-R	I D				
٠.	Chrono when an inmate is place		LD		Y	20	20
_	_						
7.	Is effective communication doc						
	on LD and TABE 4.0 or Lower Hearing (CDC 128-B-1), Class						
	disposition and final copy issua						
	Placement (CDC 114-D)? (AR						
	a. Classification Chronos (CDC	C 128 G)					
	a1. If the inmate waived or no a	<i>'</i>	ation was req	uired, is it docum	nented?		
	Reviewed 22	Number OK	11	50%		20	10
	a2. If assistance/accommodation	n was required was i	it provided?				
	Reviewed 22	Number OK	8	36%		10	4
	a3. If assistance/accommodatio	n was provided, did s	taff documen	t how they detern	nined that		
	the inmate understood the comr	1 '					
	Reviewed 22	Number OK	7	32%		10	3

H. EFFECTIVE	E COMMUN	ICATION				Value	Score
b. Notice of Class	ification Hear	rings (CDC 128 B-1)					
	aived or no as			ired, is it documented?			
Reviewed	31	Number OK	11	35%		20	7
b2. If assistance/a Reviewed	ccommodatio 32	n was required, was: Number OK	it provided? 10	31%		10	3
Reviewed		_ Number ok	10	3170		10	3
h3 If assistance/a	ccommodation	n was provided did s	taff document	how they determined that			
the inmate underst		-	tari document	now they determined that			
Reviewed	32	Number OK	9	28%		10	3
		_					•
c. Administrative	Segregation U	Jnit Placement Notic	es (CDC 114-	D)			
c1. If the inmate w	aived or no as	ssistance/accommoda	ntion was requ	ired, is it documented?			
Reviewed	0	Number OK	0	0%		0	0
		_					•
c2. If assistance/a	ccommodatio	n was required, was i	it provided?				
Reviewed	1	Number OK	1	100%		10	10
c3. If assistance/ac	commodation	n was provided, did s	taff document	how they determined that			
the inmate underst	ood the comm	nunication?					
Reviewed	0	Number OK	0	0%		0	0
1517717	- (GD.G						
d. Rule Violation I							
	aived or no as		ation was requ	iired, is it documented?			
Reviewed	9	Number OK	1	11%		20	2
	ccommodatio	n was required, was	it provided?	11%		10	1
Reviewed	9	Number OK	1	11%		10	1
12 If			CC . 1	to a second and a second and a few a			
		-	tarr document	how they determined that			
the inmate underst	ood the comin			0.07		10	1 0
Reviewed	9	Number OK	0	0%		10	0
e. Investigative En							
e1. If the inmate w	aived or no as	ssistance/accommoda	ition was requ	ired, is it documented?			
Reviewed	0	Number OK	0	0%		0	0
a) If assistance/a	aaammadatia	n was required, was i	t providad?				
Reviewed	0	Number OK	0	0%		0	0
		<del>-</del>					<u>.</u>
		-	taff document	how they determined that			
the inmate underst	ood the comm	nunication?			<u></u>		
Reviewed	0	Number OK	0	0%		0	0

	H. EFFECTIV	E COMMUNI	ICATION					Value	Score
8	_		enting effective com S and inmates on the						
	a. Medical (General). If the inmate		tion): sistance/accommoda	ntion was requ	ired, is it docu	mented?			
	Reviewed	30	Number OK	1	3%	_		20	1
	a2. If assistance/ Reviewed	accommodation 32	n was required, was i Number OK	it provided?	6%	_		10	1
	a3. If assistance/a		was provided, did st	taff document	how they deter	rmined that			
	Reviewed	27	Number OK	2	7%		Γ	10	1
	b. Dental (Gener		on): ssistance/accommoda	ation was requ	ired is it door	mented?	_		
	Reviewed	12	Number OK	4	33%	mented:	Г	20	7
		-	_	<u> </u>		_	L		1 '
	b2. If assistance/ Reviewed	/accommodation 15	n was required, was i Number OK	it provided? 5	33%	_	Ε	10	3
	b3. If assistance/s		was provided, did sunication?	taff document	how they deter	rmined that			
	Reviewed	15	Number OK	5	33%	_		10	3
	c. Mental Health		Institution): sistance/accommoda	ntion was requ	ired, is it docu	mented?			
	Reviewed	9	Number OK	0	0%		Γ	20	0
	c2. If assistance/	accommodation 10	n was required, was i Number OK	it provided?	0%	-		10	1 0
		-	was provided, did st			- rmined that	L	10	] 0
	the inmate unders		-						
	Reviewed	10	Number OK	0	0%	_		10	0
9			lling to assist inmate grams, services, and		or scribing				
	GP Units	22	Number OK	22	100%		Γ	10	10
	Spec. Housing	2	Number OK	2	100%	- -		10	10
10			rovided to hearing ar al encounters when r	-	bled inmates				
	a. Due Process								
	Reviewed	0	Number OK	0	0%	_		0	0
	b. Clinical Encou	inter				_	_		
	b.1 Medical (Ger	nerated at Insitu	tion):						
	Reviewed	0	Number OK	0	0%	_		0	0
	b.2 Dental (Gene	rated at Instituti					-		1
	Reviewed	0	Number OK	0	0%	<del>-</del>	Ĺ	0	0
	b.3 Mental Healt	,	*				-		_
	Reviewed	0	Number OK	0	0%	_	L	0	0
							Total	390	149

Total

# I. DISABILITY VERIFICATION

							vaiue	Score
1.	Is Section B of the CDC For	m 1845 comple	ted correctly?			г		1
	Number Reviewed	48	Number OK	48	100%		10	10
2.	Is section C and/or D of the	CDC Form 184	5 completed correctly?					
	Number Reviewed	33	Number OK	29	88%		10	9
3.	Is Section F (if applicable) o	f the CDC Form	n 1845 completed correc	rtlv?				
٠.	Number Reviewed	17	Number OK	15	88%		10	9
					0070	L	10	,
4.	Is there a corresponding CDO assistance with daily living n		7410 listing physical l	imitations or		r		
	Unit Health Record	28	Number OK	19	68%		10	7
	Central File	43	Number OK	28	65%		10	7
5.	Is the CDC 128B EC Chrono and speech disabilities in the			with hearing				
	Unit Health Record	17	Number OK	1	6%		10	1
	Central File	30	Number OK	24	80%		10	8
6	Is there a written procedure f	for performing 1	ngintangnea rangire and	l ranlacament		Y	10	10
U	of health care appliances (ex	-		періасешен			10	10
_		_			_			
7	Are staff following the writte	_		ce, repairs and	l			
	replacement of health care ap Number Reviewed	ppnances (excit	Number OK	3	100%	ſ	10	10
					10070	L	10	10
8	Is there a written procedure f	or performing r	maintenance, repairs and	l replacement		- V	10	10
	of wheelchairs?					Y	10	10
9	Are staff following the writte	en procedure for	r performing maintenand	ce, repairs and				
	replacement of wheelchairs?		N. 1. OV.	2	1000/	Г	10	10
	Medical	3	Number OK	3	100%		10	10
10	Are hearing aid batteries and readily available for inmates			_	ot wheelchairs) etc.	,		
	GP Housing	22	Number OK	22	100%		10	10
	Medical Housing	1	Number OK	1	100%	-	10	10
	Special Housing		Number OK	2	100%	-	10	10
	Medical Clinics	4	Number OK	4	100%	L	10	10
11	For specialized housing units an inmate whose appliance is		staff monitor the health	condition of				
	Number Reviewed	2	Number OK	2	100%		10	10
12	Are special order health care within 10 days of arrival to the		ivered to the inmate					
	Number Reviewed	2	Number OK	0	0%		10	0
13	Are prescribed health care ap	onliances annro	ved by the Correctional	Captain		Y	10	10
-	and Health Care Managers o			T		L	~	
	3	=						1
						Total	180	151

# J. DEC SYSTEM

			Value	Score
1.	Is the C&PR and/or CCIII/RC using the DEC to track DPP inmates based on the CDC 1845? Comments:	Y	20	20
2.	Are CDC 1845s received by the C&PR and/or CCIII/RC within 72 hours of verification or the inmate's arrival from another institution?  Comments:	Y	20	20
3.	Are CDC 1845s entered into the DEC within 24 hours of receipt? Comments:	Y	20	20
		Total	60	60

# K. ACCESSIBILITY OF PROGRAMS

			Value	Score						
1.	The following questions apply to Transportation and Receiving and Release operations.									
	a. Are inmates transported with their health care appliances?									
	Number Reviewed 1 Number OK 1 100%	Ī	10	10						
	b. Are inmates allowed to retain their health care appliances?	_								
	Number Reviewed 1 Number OK 1 100%		10	10						
	c. Are health care appliances listed on the inmate's property card?	_								
	Number Reviewed1		10	0						
	d. Are inmates initially housed according to their housing restrictions?									
	Number Reviewed 1 Number OK 1 100%		10	10						
	e. Are accessible vehicles used for inmates who require assistance?	_								
	Number Reviewed 1 Number OK 1 100%		10	10						
2.	Is the following information included in orientation for all inmates?									
	a. The purpose of the Disability Placement Program.	Y	5	5						
	b. Availability of the CCR, ARP and similar printed materials in									
	accessible formats.	Y	5	5						
	c. Accommodations available to qualified inmates, e.g. sign language interpreters for due									
	process events and clinical contacts	Y	5	5						
	d. Availability of TTYs and volume controlled phones.	Y	5	5						
	e. Access to inmate/staff scribes or readers and availability of									
	· · · · · · · · · · · · · · · · · · ·	Y	5	5						
	f. The CDC 1824 process.	Y	5	5						
	g. The process of personal notification by staff of visits, ducats, etc.	Y	5	5						
	h. Access to closed captioned TV in the housing unit.	0	0	0						
	i. Verified case-by-case medical exceptions to institutional									
	count procedures.	N	5	0						
	j. Information regarding emergency alarms, evacuations, written									
	announcements and notices.	N	5	0						
3.	Is orientation communicated effectively (alternate formats)?	_								
	Number Reviewed 0 Number OK 0 0%		0	0						
4.	Is the institution utilizing a separate TTY sign in sheet?									
	Number Reviewed 23 Number OK 23 100%		5	5						
5.	Is access to the TTY phone the same as the regular telephone?									
٥.		Г	=	-						
	Number Reviewed 23 Number OK 23 100%	L	5	5						
6.	population?									
	a. TV - closed captioning (VHS institutions)	_								
	Number Reviewed 0 Number OK 0 0%		0	0						

# K. ACCESSIBILITY OF PROGRAMS

							Value	Score
	<ul><li>b. Inmate Assistants (</li><li>Number Reviewed</li></ul>	designated me	obility & V,H,S insti Number OK	tutions) 0	0%	Г	0	
	c. Volume Control Te		_ Number on			L	0	0
	Number Reviewed	22	Number OK	22	100%	F	5	5
	d. Shower chairs				10070	L	J	J
	Number Reviewed	0	Number OK	0	0%		0	0
7.	Do the POST Orders is a. Announcing count,		C			_		
	Number Reviewed	25	Number OK	11	44%	[	5	2
	b. Emergency/Evacua	tion Procedur	es					
	Number Reviewed	25	Number OK	10	40%	Γ	5	2
			_			_		
8	Are ID Photos of DPx	inmates kept	with current housing	unit rosters?		<u>-</u> -		
	Number Reviewed	6	Number OK	6	100%		10	10
0	Total Control	1	T1 37	D 1: 0		_		
9.	Is the institution comp			-	1000	г		1
	Number Reviewed	25	Number OK	25	100%	L	10	10
10.	Do inmates that are ten housing or require assi programs and activitie	istance with d	aily living (ADL) ha	ve reasonable	access to equivalent			
	Number Reviewed	0	Number OK	0	0%		0	0
11.	Are inmate body searc special accommodatio prosthetic limbs?				ith			
	Number Reviewed	25	Number OK	25	100%		5	5
12.	The following question PSU/PHU /MOHU ar			n ASU/SHU/		•		
	a. Are appliances peri					-		
	Number Reviewed	2	Number OK _	2	100%	L	10	10
	b. If permitted and rer i. Is the removal due evidence for a crime of	to an immedia	ate direct threat, or co	ollected as		<u>-</u>		
	Number Reviewed	2	Number OK	2	100%	L	10	10
	ii. Does custody staff alternate in-cell accom	nmodation?	cal staff for an evalua	ation for	100%	Г	10	10

# K. ACCESSIBILITY OF PROGRAMS

							Value	Score
	iii. Is the warden or de	signee conta	cted for approval?					
	Number Reviewed	2	Number OK	2	100%		10	10
	iv. Does the ICC confi	rm the remo	val?		·			
	Number Reviewed	2	Number OK	2	100%		10	10
	v. Is the HCA or inter	im accommo	odation available to th	ne inmate for				
	in cell and out of ce	ll use as pres	scribed?					
	Number Reviewed	2		2	100%		10	10
	c. Is the HCA poster in	n staff view?						
	Number Reviewed	2	Number OK	2	100%		10	10
	d. When a HCA is reta	nined for out	of cell use, is it store	d				
	in an area accessible	e for staff to	retrieve for the inmat	te's use?				
	Number Reviewed	2	Number OK	2	100%		10	10
13.	Indicate which program	n features are	e accessible to disable	ed inmates w	ithin the ASU:			
	a. Law Library							
	Number Reviewed	2	Number OK	2	100%		5	5
	b. Exercise program							
	Number Reviewed	2	Number OK	2	100%		5	5
	c. Shower chairs							
	Number Reviewed	2	Number OK	2	100%		5	5
14.	Does visiting contain v	olume contro	olled phones or writin	ng materials				
	for inmates and the pu		phones of whith	ig inaterials				
	Number Reviewed	0	Number OK	0	0%		0	0
	•		_			·		<u> </u>
15	Is there a TTY device a	vailable for	inmates in the BPH (	Conference R	oom?			
	Number Reviewed	0	Number OK	0	0%		0	0
						Total	240	214